

# EXHIBIT "A"

## United States Bankruptcy Court, District of Delaware

Fill in this information to identify the case (Select only one Debtor per claim form):

Debtor: PSP Stores, LLCCase Number: 24-12497

## Modified Official Form 410

## Proof of Claim

04/22

Read the instructions before filling out this form. This form is for making a claim for payment in a bankruptcy case. Do not use this form to make a request for payment of an administrative expense (other than a claim entitled to priority under 11 U.S.C. § 503(b)(9)). Make such a request according to 11 U.S.C. § 503.

Filers must leave out or redact information that is entitled to privacy on this form or on any attached documents. Attach redacted copies of any documents that support the claim, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, judgments, mortgages, and security agreements. Do not send original documents; they may be destroyed after scanning. If the documents are not available, explain in an attachment.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Fill in all the information about the claim as of the date the case was filed. That date is on the notice of bankruptcy (Form 309) that you received.

**Part 1: Identify the Claim**

1. Who is the current creditor?	Capital Enterprises, Inc. Name of the current creditor (the person or entity to be paid for this claim) Other names the creditor used with the debtor _____	
2. Has this claim been acquired from someone else?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. From whom? _____	
3. Where should notices and payments to the creditor be sent?  Federal Rule of Bankruptcy Procedure (FRBP) 2002(g)	Where should notices to the creditor be sent? Address1: Jeffrey Kurtzman, Esquire Address2: 101 N Washington Avenue Address3: Suite 4A Address4: City: Margate State: NJ Postal Code: 08402 Country: Contact phone: 2158391222 Contact email: kurtzman@kurtzmansteady.com	Where should payments to the creditor be sent? (if different) Address1: Address2: Address3: Address4: City: State: Postal Code: Country: Contact phone: _____ Contact email: _____
4. Does this claim amend one already filed?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Claim number on court claims registry (if known) _____ Filed on ____ / ____ / ____	
5. Do you know if anyone else has filed a proof of claim for this claim?	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Who made the earlier filing? _____	

**Part 2: Give Information About the Claim as of the Date the Case Was Filed**

6. Do you have any number you use to identify the debtor?



No



Yes. Last 4 digits of the debtor's account or any number you use to identify the debtor: \_\_\_\_\_

7. How much is the claim?

\$ 7443.56

Does this amount include interest or other charges?



No



Yes. Attach statement itemizing interest, fees, expenses, or other charges required by Bankruptcy Rule 3001(c)(2)(A).

8. What is the basis of the claim?

Examples: Goods sold, money loaned, lease, services performed, personal injury or wrongful death, or credit card.

Attach redacted copies of any documents supporting the claim required by Bankruptcy Rule 3001(c).

Limit disclosing information that is entitled to privacy, such as health care information.

See attached invoice

9. Is all or part of the claim secured?



No



Yes. The claim is secured by a lien on property.

Nature of property:

Real estate. If the claim is secured by the debtor's principal residence, file a *Mortgage Proof of Claim Attachment* (Official Form 410-A) with this *Proof of Claim*.

Motor vehicle



Other. Describe:

Right of offset

Basis for perfection:

Possession

Attach redacted copies of documents, if any, that show evidence of perfection of a security interest (for example, a mortgage, lien, certificate of title, financing statement, or other document that shows the lien has been filed or recorded.)

Value of property:

\$ 7443.56

Amount of the claim that is secured:

\$ 7443.56

Amount of the claim that is unsecured: \$ 0.00

(The sum of the secured and unsecured amounts should match the amount in line 7.)

Amount necessary to cure any default as of the date of the petition:

\$ 7443.56

Annual Interest Rate (when case was filed) 0.00% %



Fixed



Variable

10. Is this claim based on a lease?



No



Yes. Amount necessary to cure any default as of the date of the petition.

\$ 7443.56

11. Is this claim subject to a right of setoff?



No



Yes. Identify the property: Tenant remodel allowance

**12. Is all or part of the claim entitled to priority under 11 U.S.C. § 507(a)?**

☒ No

☐ Yes. Check one:

Amount entitled to priority

A claim may be partly priority and partly nonpriority. For example, in some categories, the law limits the amount entitled to priority.

☐ Domestic support obligations (including alimony and child support) under 11 U.S.C. § 507(a)(1)(A) or (a)(1)(B).

\$ \_\_\_\_\_

☐ Up to \$3,350\* of deposits toward purchase, lease, or rental of property or services for personal, family, or household use. 11 U.S.C. § 507(a)(7).

\$ \_\_\_\_\_

☐ Wages, salaries, or commissions (up to \$15,150\*) earned within 180 days before the bankruptcy petition is filed or the debtor's business ends, whichever is earlier. 11 U.S.C. § 507(a)(4).

\$ \_\_\_\_\_

☐ Taxes or penalties owed to governmental units. 11 U.S.C. § 507(a)(8).

\$ \_\_\_\_\_

☐ Contributions to an employee benefit plan. 11 U.S.C. § 507(a)(5).

\$ \_\_\_\_\_

☐ Other. Specify subsection of 11 U.S.C. § 507(a)( ) that applies.

\$ \_\_\_\_\_

\* Amounts are subject to adjustment on 4/01/25 and every 3 years after that for cases begun on or after the date of adjustment.

**13. Is all or part of the claim entitled to administrative priority pursuant to 11 U.S.C. § 503(b)(9)?**

☒ No

☐ Yes. Indicate the amount of your claim arising from the value of any goods received by the Debtor within 20 days before the date of commencement of the above case, in which the goods have been sold to the Debtor in the ordinary course of such Debtor's business. Attach documentation supporting such claim.

\$ \_\_\_\_\_

**Part 3: Sign Below**

The person completing this proof of claim must sign and date it. FRBP 9011(b).

If you file this claim electronically, FRBP 5005(a)(2) authorizes courts to establish local rules specifying what a signature is.

A person who files a fraudulent claim could be fined up to \$500,000, imprisoned for up to 5 years, or both. 18 U.S.C. §§ 152, 157, and 3571.

Check the appropriate box:

☐

I am the creditor.

☒

I am the creditor's attorney or authorized agent.

☐

I am the trustee, or the debtor, or their authorized agent. Bankruptcy Rule 3004.

☐

I am a guarantor, surety, endorser, or other codebtor. Bankruptcy Rule 3005.

I understand that an authorized signature on this *Proof of Claim* serves as an acknowledgment that when calculating the amount of the claim, the creditor gave the debtor credit for any payments received toward the debt.

I have examined the information in this *Proof of Claim* and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

*Deborah Mills Houston* 01/21/2025

Electronic Signature

Date

Name of the person who is completing and signing this claim

Deborah Mills Houston

Name

First name

Middle name

Last name

Title/Company

Vice President, Leasing - The Robbins Companies

Identify the corporate servicer as the company if the authorized agent is a servicer.

555 City Avenue, Suite 1130

Address

Number Street

Bala Cynwyd

PA

19004

City

State

ZIP Code

Country

Contact phone

610-668-6210

Email

DeborahH@robbinscorp.com

**Additional Noticing Addresses (if provided):**

**Additional Address 1**

Name: Capital Enterprises, Inc.  
Address1: Deborah Mills Houston  
Address2: 555 City Avenue, Suite 1130  
Address3:  
Address4:  
City: Bala Cynwyd  
State: PA  
Postal Code: 19004  
Country:  
  
Contact Phone: 610-668-6210  
Contact Email: DeborahH@robbinscorp.com

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**Additional Address 2**

Name:  
Address1:  
Address2:  
Address3:  
Address4:  
City:  
State:  
Postal Code:  
Country:  
  
Contact Phone:  
Contact Email:

**Additional Supporting Documentation Provided**

☒ Yes  
☐ No

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Attachment Filename:

Claim Exhibits.pdf

**KROLL**

Electronic Proof of Claim Confirmation: 3755-1-RONTL-215274721

Claim Electronically Submitted on (UTC) : 2025-01-21T19:13:37.803Z

Submitted by: Capital Enterprises, Inc.  
kurtzman@kurtzmansteady.com



# Captial Enterprises, Inc.

555 CITY AVENUE, SUITE 1130  
BALA CYNWYD, PA 19004  
610-668-6200 fax 610-668-1810

Invoice No. WGP01

## INVOICE

### Customer

Name Pet Supplies Plus  
Address Via Email: jgoldstein@petsuppliesplus.com  
City \_\_\_\_\_  
Attn: Josh Goldstein

Date: 9/30/24  
Pet Supplies Plus West Goshen  
959 Paoli Pike  
West Chester, PA 19380

Usage	Utility Billing (36.6%) as per Lease	Unit Price	TOTAL
1	New Monument Signage - Paoli Pike	\$ 7,443.56	\$ 7,443.56
TOTAL			7,443.56

*If there any questions please contact Dorisa Brooks  
at 610-668-6218*

**PLEASE REMIT PAYMENT TO ABOVE ADDRESS**

**ADDENDUM TO PROOF OF CLAIM**

The lease documents which form the basis of this claim are voluminous and will be furnished to any party requesting a copy thereof. All such requests should be made to the claimant's counsel at the following address:

Jeffrey Kurtzman, Esquire  
**KURTZMAN | STEADY, LLC**  
101 N. Washington Avenue, Suite 4A  
Margate, NJ 08402  
Telephone: (215) 839-1222  
Email: [kurtzman@kurtzmansteady.com](mailto:kurtzman@kurtzmansteady.com)